Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
	_		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your	full name		
	your of picture exam licens Bring identi	the name that is on government-issued re identification (for aple, your driver's se or passport). your picture fication to your ing with the trustee.	Stacy First name V. Middle name Mathews Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	used Includ	ther names you have in the last 8 years de your married or en names.	Stacy V. Mathews-Long	
3.	your numb Indiv	the last 4 digits of Social Security per or federal idual Taxpayer ification number	xxx-xx-6381	

Case 18-17143 Doc 1 Filed 06/15/18

Document

Entered 06/15/18 12:52:51 Page 2 of 61 Case number (if known)

Desc Main

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINS	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		3206 Deer Path Ln. S. Chicago Heights, IL 60411 Number, Street, City, State & ZIP Code Cook	Number, Street, City, State & ZIP Code			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 18-17143 Doc 1 Filed 06/15/18

Document

Entered 06/15/18 12:52:51 Desc Main Page 3 of 61 Case number (if known)

ar	t 2: Tell the Court About	our Bank	ruptcy C	ase					
	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by</i> ge 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.			
	choosing to file under	■ Chapter 7							
		☐ Chapt	er 11						
		☐ Chapt							
		☐ Chapt							
	How you will pay the fee	abo ord	out how your	ou may pay. Typical	ly, if you are paying the fee yo	k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
				y the fee in installr ee in Installments (C		on, sign and attach the Application for Individuals to Pay			
			•	•	,	n only if you are filing for Chapter 7. By law, a judge may,			
		but app	is not red olies to yo	quired to, waive your our family size and yo	r fee, and may do so only if yo ou are unable to pay the fee ir	our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
•	Have you filed for bankruptcy within the last 8 years?	■ No.							
		— 103.	District		When	Case number			
			District		When	Case number			
			District		When	Case number			
0.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
	unnate.		Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
1.	Do you rent your	■ No.	Go to	line 12.					
	residence?	☐ Yes.	Has v	our landlord obtaine	d an eviction judgment agains	st vou?			
		— 163.		No. Go to line 12.	,	•			
				Yes. Fill out <i>Initial</i> this bankruptcy pe		Judgment Against You (Form 101A) and file it as part of			

Document Stacy V. Mathews

Debtor 1

Page 4 of 61

Case number (if known)

6/15/18 12:50PM

Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Page 5 of 61 Document

Debtor 1 Stacy V. Mathews

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

6/15/18 12:50PM

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-17143 Doc 1

Filed 06/15/18

Entered 06/15/18 12:52:51

Desc Main

6/15/18 12:50PM

Document Page 6 of 61 Case number (if known) Debtor 1 Stacy V. Mathews Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Stacy V. Mathews Signature of Debtor 2 Stacy V. Mathews Signature of Debtor 1 Executed on June 15, 2018 Executed on

MM / DD / YYYY

MM / DD / YYYY

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 7 of 61

Debtor 1 Stacy V. Mathews

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	June 15, 2018
Signature of Attorney for Debtor	_	MM / DD / YYYY
David M. Siegel		
Printed name		
David M. Siegel & Associates		
Firm name		
790 Chaddick Drive		
Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone (847) 520-8100	Email address	
#06207611 IL		
Bar number & State		

6/15/18 12:50PM

Fill in this information to identify your case:

Debtor 1

Stacy V. Mathews
First Name
Middle Name
Last Name

Debtor 2
(Spouse if, filing)
First Name
Middle Name
Last Name

United States Bankruptcy Court for the:
NORTHERN DISTRICT OF ILLINOIS

☐ Check if this is an amended filing

Official Form 106Sum

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	140,294.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,675.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	146,969.00
Pai	t 2: Summarize Your Liabilities		
			abilities at you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	134,684.00
3 .	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	49,959.00
	Your total liabilities	\$	184,643.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,846.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,853.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Document Page 9 of 61
Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Stacy V. Mathews

From Bort 4 on Schodule E/E convethe following:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

6/15/18 12:50PM

	(Case 18-1714:	3 Doc 1)6/15/18 Iment	Entered 06/15/18	3 12:52:51	Des	c Main	6/15/18 12:50PI
Fill	in this inf	ormation to identify	your case and th			T MM. TO OF				
Deb	otor 1	Stacy V. Mat	hews							
	J. 1	First Name		e Name		Last Name				
	otor 2	- Ei AN	A4: 1 H							
(Spo	use, if filing)	First Name	Middle	e Name		Last Name				
Uni	ted States	Bankruptcy Court for	the: NORTHER	N DISTR	ICT OF ILLIN	NOIS				
Cas	se number					-		[t if this is an
_		orm 106A/B I le A/B: P i	=							12/15
hink nfor nsv	t it fits best mation. If n wer every q	Be as complete and a lore space is needed, lestion.	accurate as possibl attach a separate sl	le. If two n heet to thi	narried people s form. On the	in asset fits in more than one of a are filing together, both are e e top of any additional pages, v	qually responsibl	e for supp	lying corre	ect
_										
. D	o you own o	or have any legal or eq	uitable interest in a	any reside	nce, building,	land, or similar property?				
	No. Go to	Part 2.								
	Yes. Whe	e is the property?								
1.1				What i	s the property	? Check all that apply				
	3602 De	erpath Lane		_	Single-family h	nome	Do not deduct sed	cured clain	ns or exemp	otions. Put
	Street addre	ss, if available, or other des	cription	_	Duplex or mult		the amount of any	secured of	claims on S	chedule D:
					Condominium	or cooperative	Creditors Who Ha	ive Claims	Securea by	/ Property.
				_						
	South C		00444 0000			or mobile home	Current value of		Current val	
	Heights		60411-0000	_	Land		entire property?		portion you	
	City	State	ZIP Code	_	Investment pro Timeshare	operty	\$140,29	4.00	\$1	40,294.00
					Other		Describe the nat			
				_		in the property? Check one	(such as fee sim a life estate), if k		cy by the e	intireties, or
				_	Debtor 1 only	The property : Check one				
	Cook				Debtor 2 only					
	County			_	Debtor 1 and [Debtor 2 only				
				_		the debtors and another	☐ Check if this (see instruction		unity prope	erty
				Other	information yo	ou wish to add about this item	such as local			
				proper	ty identification	on number:				

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$140,294.00

Desc Main Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Page 11 of 61
Case number (if known) Document Stacy V. Mathews Debtor 1 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Mitsubishi Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Outlander Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2009 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$4,875.00 \$4,875.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$4,875.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Household Goods & Furniture** \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... TV & Electronics \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

Debtor 1	Case 18-1		Doc 1	Filed 06/15/18 Document	Entere Page 12	ed 06/15/18 12:52:51 2 of 61 Case number (if known)	Desc Main	6/15/18 12:50PM
	s. Describe					,		
I1. Cloti <i>Exal</i> □ No	nes	othes, furs	, leather coats	s, designer wear, shoes	, accessories			
		Normal	Apparel					\$300.00
■ No □ Ye	mples: Everyday jev	,	, ,	engagement rings, wed	ding rings, he	eirloom jewelry, watches, gems,	gold, silver	
■ No	s. Describe	olius, nois	es					
■ No	other personal and		-	ս did not already list, i	ncluding any	y health aids you did not list		
for	Part 3. Write that I	number h		om Part 3, including a		or pages you have attached 		\$900.00
	Describe Your Finand Down or have any le		uitable intere	est in any of the follow	ring?		Current val portion you Do not dedu claims or ex	own? oct secured
■ No	mples: Money you h	-		our home, in a safe depo		on hand when you file your petit	ion	
17. Dep o	osits of money mples: Checking, sa institutions.	avings, or	other financia	I accounts; certificates of ounts with the same ins	of deposit; sha stitution, list ea	ares in credit unions, brokerage ach.	houses, and other	similar
■ Ye	S			Institution r	name:			
		17.1.	Checking	MB Finan	ıcial			\$0.00
	is, mutual funds, o mples: Bond funds,			eks ith brokerage firms, mor	ney market ac	ccounts		
`	S	li	nstitution or is	suer name:				
	venture	ock and ir	nterests in in	corporated and uninc	orporated bu	usinesses, including an intere	st in an LLC, part	nership, and
	s. Give specific info		bout them e of entity:			% of ownership:		
Neg Non ■ No	otiable instruments -negotiable instrum	include pe e <i>nt</i> s are th	ersonal check nose you canr	negotiable and non-nos, cashiers' checks, pro not transfer to someone	missory notes	s, and money orders.		
	s. Give specific info orm 106A/B	rmation al	oout them	Schedule A/B: F	Property			page 3

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Page 13 of 61
Case number (if known) Document Debtor 1 Stacy V. Mathews Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **Erisa Qualified** \$600.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Income Tax \$300.00 **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information......

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

Schedule A/B: Property

■ No

☐ Yes. Give specific information..

Entered 06/15/18 12:52:51 Case 18-17143 Doc 1 Filed 06/15/18 Desc Main Document Page 14 of 61 Case number (if known) Debtor 1 Stacy V. Mathews 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: **Term Life Insurance Death Benefits Only** \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$900.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. No. Go to Part 6. ☐ Yes. Go to line 38.

37. Do you own or have any legal or equitable interest in any business-related property?

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Desc Main Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51

Page 15 of 61

Case number (if known) Document Debtor 1 Stacy V. Mathews

List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$140,294.00 55. Part 2: Total vehicles, line 5 56. \$4,875.00 Part 3: Total personal and household items, line 15 \$900.00 57. 58. Part 4: Total financial assets, line 36 \$900.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$6,675.00 \$6,675.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$146,969.00

Official Form 106A/B Schedule A/B: Property page 6

		Docume	nt Page 16 of 61	0/15/16	2.50F W
Fill in this inform	nation to identify your	case:			
Debtor 1	Stacy V. Mathews	5			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	
					

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Proper	y You Claim as Exempt
-----------------------------	-----------------------

1.	Which set of exemptions are	you claiming?	Check one only.	even if your s	pouse is filing	with yo	эu

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
3602 Deerpath Lane South Chicago Heights, IL 60411 Cook County	\$140,294.00		\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2009 Mitsubishi Outlander Line from Schedule A/B: 3.1	\$4,875.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line Holli Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
2009 Mitsubishi Outlander Line from Schedule A/B: 3.1	\$4,875.00		\$2,475.00	735 ILCS 5/12-1001(b)
Ellie Holli Garicadic 74 B. G.1			100% of fair market value, up to any applicable statutory limit	
Household Goods & Furniture Line from Schedule A/B: 6.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line Hotti Schedule A/B. V. I			100% of fair market value, up to any applicable statutory limit	
TV & Electronics Line from Schedule A/B: 7.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line IIOIII Scriedule A/D. 111			100% of fair market value, up to any applicable statutory limit	

Debtor 1 Stacy V. Mathews

Document Page 17 of 61
Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own			Specific laws that allow exemptio
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	al Apparel om Schedule A/B: 11.1	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
Line no	III Scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
	king: MB Financial	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.1	III Scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
401(k): Erisa Qualified		\$600.00		\$600.00	735 ILCS 5/12-1006
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
Federal: Income Tax Line from Schedule A/B: 28.1		\$300.00		\$300.00	735 ILCS 5/12-1001(g)(1)
Line no	III Scredule A/B. 20.1			100% of fair market value, up to any applicable statutory limit	
	Life Insurance	\$0.00		\$0.00	215 ILCS 5/238
Beneficiary: Death Benefits Only Line from Schedule A/B: 31.1				100% of fair market value, up to any applicable statutory limit	

Yes

Case	18-17143		led 06/15/18 Document	Entere	d 06/15/18 12: Lof 61	52:51 Desc N —	//ain 6/15/18 12:50P
Fill in this informatio	n to identify you	ır case:					
	tacy V. Mathev	VS Middle Na	ame	Last Name			
Debtor 2 (Spouse if, filing)	rst Name	Middle Na	ame	Last Name			
United States Bankrup	otcy Court for the:	NORTHERN	I DISTRICT OF ILI	LINOIS			
Case number			_			_	c if this is an ded filing
Official Form 10	06D						
Schedule D:	Creditors	Who Hav	ve Claims	Secure	by Propert	y	12/15
se as complete and acc s needed, copy the Add umber (if known).							
. Do any creditors have	claims secured by	your property?					
☐ No. Check this	box and submit the	his form to the co	ourt with your other	schedules. Yo	ou have nothing else to	o report on this form.	
Yes. Fill in all o	of the information	below.					
Part 1: List All Sec	cured Claims						
List all secured claim for each claim. If more the much as possible, list the	nan one creditor has	a particular claim,	list the other creditor	s in Part 2. As	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Loandepot.co	m, Llc		operty that secures		\$134,684.00	\$140,294.00	\$0.00
Creditor's Name			th Lane South (60411 Cook Co	-			
26642 Towne Foothill Rancl		As of the date y apply. Contingent	ou file, the claim is:	Check all that			
Number, Street, City,	State & Zip Code	☐ Unliquidated					
		Disputed					
Who owes the debt? (Check one.	_	Check all that apply.				
■ Debtor 1 only ■ Debtor 2 only		☐ An agreemer car loan)	it you made (such as	mortgage or sec	ured		
Debtor 1 and Debtor 2	2 only	☐ Statutory lien	(such as tax lien, me	chanic's lien)			
At least one of the de			n from a lawsuit	,			
Check if this claim recommunity debt		_	ing a right to offset)	First Mortg	age		
	Opened 08/17 Last Active						
Date debt was incurred		Last 4 di	gits of account num	ber 6124			

\$134,684.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$134,684.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

	Ca	se 18-17143				d 06/15/18 12:52:5) of 61	51 Des	c Main	6/15/18 12:50PM
Fill in	this inforn	nation to identify your o							
Debto	or 1	Stacy V. Mathews	,						
Debit) 1	First Name	Middle Nam	ne Last	Name				
Debto									
(Spous	e if, filing)	First Name	Middle Nam	ne Last	Name				
Unite	d States Bai	nkruptcy Court for the:	NORTHERN	DISTRICT OF ILLINOIS	S				
Case	number								
(if know							☐ CH	heck if this	is an
							an	nended filir	ng
⊃ffi.c	sial Earn	106E/E							
		<u>n 106E/F</u> /F: Creditors W	ho Have I	Insecured Cla	ime			11	2/15
						art 2 for creditors with NONP	DIODITY alain		
ichedi eft. At ame a	ule D: Credito tach the Con and case nun	ors Who Have Claims Sect tinuation Page to this pag nber (if known).	ured by Property e. If you have no	. If more space is needed information to report in	d, copy tl	iny creditors with partially sence Part you need, fill it out, nuonot file that Part. On the top	ımber the enti	ries in the b	ooxes on the
Part '		ll of Your PRIORITY Un							
		ors have priority unsecured	d claims against	you?					
	No. Go to P	art 2.							
	Yes.	I of Your NONPRIORIT	V Unacquired C	Naima					
Part 2 3. D		ors have nonpriority unsec							
_	•		_	•	4h o r o o b o	dulaa			
_	_	ve nothing to report in this pa	art. Submit this for	im to the court with your o	uner sche	uules.			
	Yes.								
ur th	nsecured clair	n, list the creditor separately	for each claim. F	or each claim listed, identi	ify what ty	holds each claim. If a creditor rpe of claim it is. Do not list clair three nonpriority unsecured clai	ns already incl	uded in Part	1. If more
								Total clain	n
4.1	Acme C	ontl Credit Unio	L	ast 4 digits of account n	number	6813			\$2,524.00
	Nonpriority	Creditor's Name				Onened 11/14 Leet A			
		Perry Ave le, IL 60827	v	When was the debt incur	red?	Opened 11/14 Last Ac 1/12/18			
	Number St	treet City State Zlp Code rred the debt? Check one.	A	As of the date you file, the	e claim is	s: Check all that apply			
	■ Debtor	1 only	Г	☐ Contingent					
	☐ Debtor	-		☐ Unliquidated					
		1 and Debtor 2 only		Disputed					
		t one of the debtors and and	_	ype of NONPRIORITY ur	nsecured	claim:			
	_	if this claim is for a comm	г	☐ Student loans					
	debt	m subject to offset?	Ţ	Obligations arising out of eport as priority claims	of a separ	ation agreement or divorce that	you did not		
	■ No			Debts to pension or pro	fit-sharing	plans, and other similar debts			
	☐ Yes		ı	Other. Specify Purc	hases				

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51

Document Page 20 of 61 Case number (if know)

Desc Main

4.2 \$482.00 Aspen Dental Last 4 digits of account number Nonpriority Creditor's Name 15894 S LaGrange Road When was the debt incurred? Orland Park, IL 60462 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.3 Capital One Last 4 digits of account number 9461 \$2,979.00 Nonpriority Creditor's Name Opened 04/07 Last Active 15000 Capital One Dr 1/03/18 When was the debt incurred? Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify 4.4 **Capital One** Last 4 digits of account number 4683 \$1,478.00 Nonpriority Creditor's Name Opened 05/14 Last Active 15000 Capital One Dr When was the debt incurred? 1/03/18 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Purchases

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51

Document Page 21 of 61 Case number (if know)

Desc Main

Debtor 1 Stacy V. Mathews 4.5 \$7,772.00 **CBNA (Home Depot)** Last 4 digits of account number Nonpriority Creditor's Name Attn: Banrkuptcy Dept. When was the debt incurred? PO Box 769006 San Antonio, TX 78245-9006 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes **Purchases** Other. Specify 4.6 **Chase Card** \$1,674.00 Last 4 digits of account number 3159 Nonpriority Creditor's Name Opened 07/16 Last Active Po Box 15298 1/02/18 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify 4.7 **Comenity Bank/carsons** Last 4 digits of account number 2507 \$95.00 Nonpriority Creditor's Name Opened 01/14 Last Active Po Box 182789 When was the debt incurred? 12/09/16 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Purchases ☐ Yes

Document Page 22 of 6

Page 22 of 61
Case number (if know)

4.8 \$99.00 Comenity Bank/pier 1 Last 4 digits of account number 8070 Nonpriority Creditor's Name Opened 06/14 Last Active Po Box 182789 When was the debt incurred? 1/07/18 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify 4.9 Creditors Collection Bureau Inc. Last 4 digits of account number \$28.00 Nonpriority Creditor's Name **PO Box 63** When was the debt incurred? Kankakee, IL 60901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.1 **DJO Global** 9573 \$29.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 599 Cardigan Road When was the debt incurred? **Opened 08/16** Saint Paul, MN 55126 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collections

Document

Page 23 of 61 Case number (if know)

Donna Sharp Collection Dept.	Last 4 digits of account number	\$83
Nonpriority Creditor's Name 9650 Gordon Drive Highland, IN 46322	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Collections	
Franciscan Alliance	Last 4 digits of account number	\$3
Nonpriority Creditor's Name 28044 Network Place	When was the debt incurred?	
Chicago, IL 60673-1280 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Franciscan Hammond Clinic, LLC	Last 4 digits of account number 8190	\$9
Nonpriority Creditor's Name 7905 Calumet Ave	When was the debt incurred?	
Munster, IN 46321-1298 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Collections	

Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Case 18-17143

Document

Page 24 of 61 Case number (if know)

Debto	r1 Stacy V. Mathews	Case number (if know)	
4.1	Franciscan Physican	Last 4 digits of account number	\$80.00
	Nonpriority Creditor's Name 701 Superior Drive Munster, IN 46321	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1	Franciscan St. Margaret	Last 4 digits of account number	\$35.00
	Nonpriority Creditor's Name 701 Superior Drive	When was the debt incurred?	
	Munster, IN 46321		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	•	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Medical	
4.1 6	Komyatte & Casbon Nonpriority Creditor's Name	Last 4 digits of account number	\$668.00
	Attn: Collections Department 9650 Gordon Drive Highland, IN 46322	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	

Document Page 25 of 6

Page 25 of 61
Case number (if know)

4.1	M & M Asset Locators	Last 4 digits of account number	90	\$0.00		
	Nonpriority Creditor's Name Attn:Bankruptcy	When was the debt incurred?				
	213 Rainbow Drive #11343 Livingston, TX 77399 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify				
4.1	Macy's	Last 4 digits of account number	2115	\$295.00		
	Nonpriority Creditor's Name Bankruptcy Processing PO Box 8053	When was the debt incurred?	Opened 06/14 Last Active 10/27/17			
	Mason, OH 45040 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	• ,				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	ag plane, and other similar debts			
	■ No □ Yes	Other. Specify Purchases				
9	Nationwide Credit & Collections, In Nonpriority Creditor's Name	Last 4 digits of account number		\$500.00		
	815 Commerce Drive Suite 100	When was the debt incurred?				
	Oak Brook, IL 60523 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	,	onock an that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	·				
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes	Other. Specify Collections	S			

Case 18-17143

Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 26 of 61 Case number (if know)

4.2	Nationwide Credit & Collections, In	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 815 Commerce Drive	When was the debt incurred?	
	Suite 100		
	Oak Brook, IL 60523 Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify NOTICE ONLY	
4.2	Pathology Consultants, Inc.	Last 4 digits of account number 9185	\$120.00
1	Nonpriority Creditor's Name	Last 4 digits of account findinger	Ψ120.00
	PO Box 30309	When was the debt incurred? Opened 9/03/13	
	Charleston, SC 29417-0309 Number Street City State Zlp Code	As of the data you file the plain is Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.2	PCL Alverno		£270.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	\$270.00
	7905 Calumet Ave	When was the debt incurred?	
	Munster, IN 46321	As of the late of the development of the late of the l	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	O continuent	
	_ ,	☐ Contingent	
	Debtor 2 and Debtor 3 and	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collections	

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51

Debtor 1 Stacy V. Mathews

Document

Desc Main Page 27 of 61 Case number (if know)

4.2 Professional Clinical Laboratories, \$28.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 555 W Court Street When was the debt incurred? Suite 300 Kankakee, IL 60901-3600 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.2 Prosper Marketplace In 6592 \$10,799.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/16 Last Active 101 2nd St FI 15 When was the debt incurred? 11/10/17 San Francisco, CA 94105 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Loan 4.2 **SBA Disaster Recovery-Collection** \$6.726.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 740192 When was the debt incurred? Atlanta, GA 30374-0192 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections

Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Case 18-17143

Document

Page 28 of 61 Case number (if know)

4.2	Scheck & Siress Prosthetics Inc.	Last 4 digits of account number		\$530.00
6	Nonpriority Creditor's Name			
	1S376 Summit Ave., Ct. E	When was the debt incurred?		
	Oak Brook Terrace, IL 60181 Number Street City State Zlp Code	As of the date you file, the claim	ie: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 2 only Debtor 1 and Debtor 2 only	<u> </u>		
		☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	☐ Student loans	d dann.	
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	fraction agreement of divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical		
4.2	Sears/cbna		7480	\$1,475.00
7	Nonpriority Creditor's Name	Last 4 digits of account number		\$1,475.00
			Opened 10/17 Last Active	
	Po Box 6189	When was the debt incurred?	12/20/17	
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.0 of the date you me, the dam	o. Chook all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other Specify Purchases		
4.2				
8	Syncb/care Credit	Last 4 digits of account number	6346	\$1,660.00
	Nonpriority Creditor's Name		Opened 00/00 Lept Active	
	950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	Opened 09/09 Last Active 3/20/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical		

Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Case 18-17143

Document

Page 29 of 61 Case number (if know)

4.2	Syncb/value City Furni	Last 4 digits of account number	0778	\$1,822.00
٦	Nonpriority Creditor's Name	_		
	950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	Opened 09/16 Last Active 12/07/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.3	Syncb/walmart	Last 4 digits of account number	7121	\$316.00
٦	Nonpriority Creditor's Name	_		
	Po Box 965024 Orlando, FL 32896	When was the debt incurred?	Opened 07/14 Last Active 10/29/17	
	Number Street City State Zlp Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Purchases		
4.3	Thd/cbna	Last 4 digits of account number	7452	\$5,569.00
	Nonpriority Creditor's Name Po Box 6497	When was the debt incurred?	Opened 08/17 Last Active 1/12/18	
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	_	s. Спеск ан тат арріу	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 		
	■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify Purchases	.	
	100	- Other. Specify		

Document Page 30 of 6

Page 30 of 61
Case number (if know)

4.3	The University of Illinois at Chic	Last 4 digits of account number	\$711.00
	Nonpriority Creditor's Name Physician Group	When was the debt incurred?	
	3293 Payshere Circle Chicago, IL 60674		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.3	The University of Illinois Chicago		#co.oo
3	The University of Illinois Chicago Nonpriority Creditor's Name	Last 4 digits of account number	\$68.00
	Surgery Clinic	When was the debt incurred?	
	1801 West Taylor St., 1st Floor		
	Chicago, IL 60612 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The St. Sile State year ine, sile State is Strook all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Medical	
4.3	U Of I Department Of Pathology	Last 4 digits of account number	\$62.00
	Nonpriority Creditor's Name 5841 S. Maryland Avenue	When was the debt incurred?	
	Chicago, IL 60637		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	

Document Page 31 of 6

Page 31 of 61
Case number (if know)

4.3	UIC Physician Group	Last 4 digits of account number	\$50.00
	Nonpriority Creditor's Name 7720 Solution Center Chicago, IL 60677-7007	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.3	Univ of Illinois Phys	Last 4 digits of account number	\$10.00
	Nonpriority Creditor's Name PO Box 140250	When was the debt incurred?	
	Toledo, OH 43614 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.3	University of Illinois College of M	Last 4 digits of account number	\$30.00
	Nonpriority Creditor's Name 7720 Solution Center Chicago, IL 60677-7007	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Medical	

Desc Main

Page 32 of 61 Case number (if know) Document Debtor 1 Stacy V. Mathews

4.3 8	University of Illinois College of M	Last 4 digits of account nun	nber	\$20.00
<u> </u>	Nonpriority Creditor's Name	_		<u>-</u>
	7720 Solution Center	When was the debt incurred	?	
	Chicago, IL 60677-7007 Number Street City State Zlp Code	As of the date you file, the c	laim in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you me, the c	танн із. Спеск ан шасарріу	
	■ Debtor 1 only	По ::		
	_	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a report as priority claims	separation agreement or divorce that you did not	
	No		sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medica	<u> </u>	
Part :	3: List Others to Be Notified About a De	ebt That You Already Listed		
is tr hav	ying to collect from you for a debt you owe to s	omeone else, list the original credi at you listed in Parts 1 or 2, list the	that you already listed in Parts 1 or 2. For example tor in Parts 1 or 2, then list the collection agency additional creditors here. If you do not have addi	here. Similarly, if you
Name	and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
	gon Collection Agency	Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claim	ns
	5 W Sahara		Part 2: Creditors with Nonpriority Unsecured C	laims
Las	Vegas, NV 89102	Last 4 digits of account number		
		<u> </u>		
	and Address ditors Collection Bureau Inc.	On which entry in Part 1 or Part 2 di Line 4.22 of (<i>Check one</i>):	<i>'</i>	
	Box 63	Line 4.22 of (Check one).	Part 1: Creditors with Priority Unsecured Claim	
_	kakee, IL 60901		■ Part 2: Creditors with Nonpriority Unsecured C	laims
		Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
	nyatte & Casbon	Line 4.11 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claim	ns
	: Collections Department		Part 2: Creditors with Nonpriority Unsecured C	
) Gordon Drive			
High	nland, IN 46322	Last 4 digits of account number		
		Last 1 digits of account frames		
	and Address	On which entry in Part 1 or Part 2 di	·	
	nyattecasb) Gordon Drive	Line 4.21 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claim	
	land, IN 46322		■ Part 2: Creditors with Nonpriority Unsecured C	laims
5-	,	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
	CYSDSNB	Line 4.18 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claim	ns
	Duke Blvd.	(Part 2: Creditors with Nonpriority Unsecured C	
Mas	on, OH 45040		— Tart 2. Creditors with Nonphority Orisecured C	iaiiis
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
	med Revenue Group	Line 4.13 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claim	ns
	t. 77304		■ Part 2: Creditors with Nonpriority Unsecured C	laims
	Box 77000 oit, MI 48277-0304			
- 511	OII, III. TOE11 000T	Last 4 digits of account number		
		·		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

Page 33 of 61 Case number (if know) Document

ebtor 1 Sta	acy V. I	Mathews Document P	Cas	e numbe	er (if know)
Total	6a.	Domestic support obligations	6a.	. \$	0.00
claims m Part 1	6b.	Taxes and certain other debts you owe the government	6b.	. \$	0.00
	6c.	Claims for death or personal injury while you were intoxical	ated 6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount	unt here. 6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Γotal	6f.	Student loans	6f.	\$	Total Claim 0.00
laims Part 2	6g.	Obligations arising out of a separation agreement or divor you did not report as priority claims	6g.	-	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar		. \$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that a here.	imount 6i.	\$	49,959.00
	6i.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	49,959.00

		DOGDINE	III Paue 34 0101	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Stacy V. Mathews	S		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amended filin

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the , Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Olaic	Zii Gode	
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

	Case 10-17145	Docume Docume		oo/13/10 12.32.31 of 61	6/15/18 12:50PI
Fill in this	information to identify your				
Debtor 1	Stacy V. Mathew	S			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
	ates Bankruptcy Court for the:	NORTHERN DISTRICT			
United Sta	ites Bankrupicy Court for the.	NORTHERN DISTRICT	OF ILLINOIS		
Case num (if known)	ber				☐ Check if this is an amended filing
Officia	l Form 106H				
		lobtoro			40/45
Sched	lule H: Your Cod	eptors			12/15
1. Do ■ No □ Yes	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
	hin the last 8 years, have you na, California, Idaho, Louisiana				tes and territories include
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the cr	h you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The credito Check all schedules that	r to whom you owe the debt apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street City	State	ZIP Code	_	
3.2				Cohodula D. lina	
	Name			□ Schedule D, line _ □ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	
	City	State	ZIP Code		

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 36 of 61

Cill	in this information to identify your c	200:				•				
	otor 1 Stacy V. Ma									
	otor 2									
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
(If kr	fficial Form 106I					13 inc	nended pleme	nt showing s of the fol	postpetition cha lowing date:	pter
S	chedule I: Your Inc	ome								12/1
spo atta Par	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment	ır spouse is not filing w	ith you, do not include	infor	mati	on about you	ir spo	use. If mo	re space is need	ded,
1.	Fill in your employment information.		Debtor 1			Del	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			_	Emplo	•		
		. ,	☐ Not employed		⊔ Not €			nployed		
	Include part-time, seasonal, or	Occupation	Receptionist							
	self-employed work.	Employer's name Hub Internationa		<u> </u>						
	Occupation may include student or homemaker, if it applies.	Employer's address	55 East Jackson E Chicago, IL 60601							
		How long employed t	here? 14 Years							_
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to repo	ort for	any	line, write \$0	in the s	space. Incl	ude your non-filir	ng
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information f	or all e	empl	oyers for that	persor	n on the lin	es below. If you r	need
						For Debtor	1	For Deb	tor 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,911	00.1	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	C	0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

0.00

3,911.00

\$

N/A

N/A

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 37 of 61 $^{6/15/18}$ Entered 06/15/18 12:52:51

Deb	tor 1	Stacy V. Mathews		Case	number (if known)			
				For	Debtor 1	non-	Debtor 2 or filing spouse	
	Cop	y line 4 here	4.	\$	3,911.00	\$	N/A	_
5.	List	all payroll deductions:						
	5a. 5b. 5c. 5d.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans	5a. 5b. 5c. 5d.	\$ \$ \$	703.00 0.00 0.00 0.00	\$ \$ 	N/A N/A N/A	-
	5e. 5f. 5g. 5h.	Insurance Domestic support obligations Union dues Other deductions. Specify: Life Insurance	5e. 5f. 5g. 5h.+	· -		\$ \$ + \$	N/A N/A N/A	- - -
		STD BUY UP 80%	_	\$	7.00	\$	N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,065.00	\$	N/A	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,846.00	\$	N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$-	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	-
	8d.	Unemployment compensation	8d.	\$_	0.00	\$-	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$	0.00	\$	N/A	_
	8g.	Pension or retirement income	8g.	\$_ \$	0.00	\$ +\$	N/A N/A	_
9.	8h. Add	Other monthly income. Specify: all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	_ ^{8h.+} 9.	Φ \$	0.00	+ \$ \$	N/A N/A	-
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	2,846.00 + \$_		N/A = \$	2,846.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•		chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies			,		12. \$	2,846.00
13.	Do y	you expect an increase or decrease within the year after you file this form? No.	?				Combir monthl	ned y income
	_	Yes. Explain:						

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 38 of 61 $^{6/15/18}$ 12:50PM

	in this information to identify you					
	in this information to identify your oter 1 Stacy V. Mathe			Ch	eck if this is:	
	otor 2ouse, if filing)					wing postpetition chapter the following date:
Unit	eed States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	IOIS		MM / DD / YYYY	
	nown)					
Of	fficial Form 106J					
S	chedule J: Your E	xpenses				12/15
Par 1.	prmation. If more space is need the comber (if known). Answer every the comber (if known). Answer every the comber (if known). Answer every the comber is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in No Yes. Debtor 2 must for the comber in the comb	old a separate household? file Official Form 106J-2, Expenses	form. On the top of a	ny addi	tional pages, write y	
2.		■ No	5		Daniel India	Book book but
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the dependents names.					□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes
3.	Do your expenses include expenses of people other that yourself and your dependent:	- IIVes				□ No □ Yes
Est exp	t 2: Estimate Your Ongoing					
the		on-cash government assistance i have included it on <i>Schedule I:</i> Y			Your exp	enses
4.	The rental or home ownership payments and any rent for the g	p expenses for your residence. I ground or lot.	nclude first mortgage	4.	\$	1,250.00
	If not included in line 4:					
	4a. Real estate taxes 4b. Property, homeowner's, of the Homeowner's and the Homeowner's areas and the Homeowner's areas areas and the Homeowner's areas areas areas areas and the Homeowner's areas ar			4a. 4b.	\$	0.00
	4c. Home maintenance, repa4d. Homeowner's association	air, and upkeep expenses n or condominium dues		4c. 4d.		0.00

0.00

Additional mortgage payments for your residence, such as home equity loans

Debtor 1		Stacy V. Mathews			Case number (if known)			
6.	Utilit	ies:						
	6a.	Electricity,	heat, natural gas	6a.	\$	260.00		
	6b.	Water, sev	wer, garbage collection	6b.	\$	100.00		
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	100.00		
	6d.	Other. Spe	ecify:	6d.	\$	0.00		
7.	Food		ekeeping supplies		\$	380.00		
			hildren's education costs	8.	\$	0.00		
			ry, and dry cleaning	9.	\$	85.00		
			products and services	10.	· ·	70.00		
		-	ntal expenses	11.		300.00		
			Include gas, maintenance, bus or train fare.		· -	000.00		
		•	ar payments.	12.	\$	240.00		
13.			clubs, recreation, newspapers, magazines, and	books 13.	\$	0.00		
			ributions and religious donations	14.	\$	0.00		
15.	Insu	rance.	•					
	Do no	ot include in	surance deducted from your pay or included in line	es 4 or 20.				
	15a.	Life insura	ince	15a.		0.00		
	15b.	Health inst	urance	15b.	\$	0.00		
	15c.	Vehicle ins	surance	15c.	\$	68.00		
	15d.	Other insu	rance. Specify:	15d.	\$	0.00		
16.	Taxe	s. Do not in	clude taxes deducted from your pay or included in	lines 4 or 20.				
	Spec	cify:		16.	\$	0.00		
17.			ease payments:					
			ents for Vehicle 1	17a.	\$	0.00		
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00		
	17c.	Other. Spe	ecify:	17c.	\$	0.00		
	17d.	Other. Spe	ecify:	17d.	\$	0.00		
18.			of alimony, maintenance, and support that you			0.00		
			your pay on line 5, Schedule I, Your Income (Of		·	0.00		
19.			s you make to support others who do not live w	-	\$	0.00		
	Spec	-		19.				
20.			erty expenses not included in lines 4 or 5 of thi					
			s on other property	20a.	· -	0.00		
		Real estat		20b.	·	0.00		
			nomeowner's, or renter's insurance	20c.	· -	0.00		
			ice, repair, and upkeep expenses	20d.		0.00		
			er's association or condominium dues	20e.	· ·	0.00		
21.	Othe	r: Specify:		21.	+\$	0.00		
22	Calc	ulate vour r	monthly expenses					
22.		Add lines 4	• •		\$	2,853.00		
			2 (monthly expenses for Debtor 2), if any, from Off	cial Form 106 L-2	\$ ———	2,833.00		
				ciai i oiiii 1005-2				
	22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	2,853.00		
23.	Calc	ulate vour r	monthly net income.					
			12 (your combined monthly income) from Schedule	e I. 23a.	. \$	2,846.00		
			monthly expenses from line 22c above.	23b.	*	2,853.00		
	_00.	copy you.				2,000.00		
	23c.	Subtract v	our monthly expenses from your monthly income.					
			is your monthly net income.	23c.	\$	-7.00		
			•					
24.			an increase or decrease in your expenses withi					
			ou expect to finish paying for your car loan within the year	or do you expect your mortgage	payment to increa	se or decrease because of a		
			terms of your mortgage?					
	■ No							
	\square Ye	es.	Explain here:					

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 40 of 61 $^{6/15/18 \ 12:50PM}$

Fill in this info	ormation to identify your	case:			
Debtor 1	Stacy V. Mathew	S			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle News	Loot Name		
(Spouse if, filing)	FIRST Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	rm 106Dec				
		an Individual	Debtor's Sc	hadulas	40/45
Deciara	HIOH ADOUL &	ili ilidividuai	Depioi 3 30	iledules	12/15
years, or both.	ey or property by fraud i 18 U.S.C. §§ 152, 1341, 7 gn Below		rruptcy case can result ii	n fines up to \$250,000, o	or imprisonment for up to 20
Did you p	pay or agree to pay some	eone who is NOT an attor	ney to help you fill out b	eankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach <i>Bankru</i> n	tcy Petition Preparer's Notice,
					d Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules file	d with this declaration a	nd
X /s/ St	acy V. Mathews		X		
	V. Mathews		Signature of	Debtor 2	
	ture of Debtor 1		- J		
Date	June 15, 2018		Date		

Fill	in this	s information to identify you	r case:			
Deb	otor 1	Stacy V. Mathew				
Deb	otor 2	First Name	Middle Name	Last Name		
	use if, fili	ing) First Name	Middle Name	Last Name		
Uni	ted Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
	se num	ber				Check if this is an amended filing
Sta Be a	aten s com	nent of Financial applete and accurate as possion. If more space is needed, known). Answer every que	ible. If two married people a attach a separate sheet to	are filing together, both are	equally responsible for su	
		Give Details About Your Ma		Lived Before		
1.	What	is your current marital statu	ıs?			
	_	Married				
		Not married				
2.	Durin	g the last 3 years, have you	lived anywhere other than	where you live now?		
	_	No Yes. List all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debt	or 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state		n the last 8 years, did you ev territories include Arizona, Ca				
Par		No /es. Make sure you fill out <i>Scl</i> Explain the Sources of You	,	fficial Form 106H).		
4.	Fill in	ou have any income from en the total amount of income yo are filing a joint case and you	u received from all jobs and a	all businesses, including part-	time activities.	endar years?
		No				
		es. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		uary 1 of current year until ou filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,640.00	☐ Wages, commissions, bonuses, tips	

☐ Operating a business

Operating a business

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main

Debtor 1 Stacy V. Mathews

Document Page 42 of 61
Case number (if known)

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	or last caler anuary 1 to	ndar year: December	31, 2017)	■ Wages, commissions, bonuses, tips	\$32,630.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$43,625.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	and other winnings. List each No	public bene If you are fil	fit payments; ng a joint cas he gross inco	ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	est; dividends; money collector received together, list it to	cted from lawsuits; only once under De	royalties; and ebtor 1.	
	– 103.	i iii iii tile de	italis.	Deliterat		Dalitano		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6.	Are eithe ☐ No.	Neither De individual p	ebtor 1 nor Dorimarily for a	's debts primarily consumer bebtor 2 has primarily consu personal, family, or househol are you filed for bankruptcy, di	imer debts. Consumer debi d purpose."			(8) as "incurred by an
		□ No.	Go to line 7		, , , ,	. ,		
		☐ Yes	paid that cr	each creditor to whom you pai editor. Do not include paymen payments to an attorney for th	its for domestic support obliq			
		* Subject	to adjustmen	t on 4/01/19 and every 3 years	s after that for cases filed on	or after the date o	f adjustment.	
	■ Yes.			r both have primarily consure you filed for bankruptcy, di		al of \$600 or more?		
		■ No.	Go to line 7	•				
		□ Yes	include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.				
	Creditor	's Name and	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main 6/15/18 12:50PM

Page 43 of 61
Case number (if known) Document Debtor 1 Stacy V. Mathews

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.						
	■ No						
	☐ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		yments or transfer a	any property on a	ccount of a de	ebt that benefited an	
	■ No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name	
Pai	t 4: Identify Legal Actions, Repossession	ne and Foreclosures	•				
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	e case	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied? Value of the	
	Orealter Hame and Address					property	
		Explain what happene	d				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.		cluding a bank or fil	nancial institutior	n, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount	
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess			efit of creditors, a	
Pai	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	00 per person?	?	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main

Page 44 of 61 Case number (if known) Document Debtor 1 Stacy V. Mathews 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You David M. Siegel & Associates 1/20/2018 -\$570.00 **Attorney Fees** 790 Chaddick Drive 6/8/18 Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made

Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer Description and value of Describe any property or Date transfer was payments received or debts **Address** property transferred made paid in exchange Person's relationship to you

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Page 45 of 61 Case number (if known) Document

Debtor 1 Stacy V. Mathews

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.						
	Name of trust Description and value of the property transferred m						
Par	List of Certain Financial Accounts, Inc.	struments, Safe Deposi	t Boxes, and St	orage Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assolution No Yes. Fill in the details.	or other financial accou	nts; certificates	of deposit;		, , ,	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	c n	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for	r bankruptcy, a	ny safe depo	sit box or other depo	sitory for securities,	
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, itate and ZIP Code)			Do you still have it?	
22.	Have you stored property in a storage unit of	or place other than your	home within 1	year before	you filed for bankrup	tcy?	
	NoYes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe th	e contents	Do you still have it?	
Par	19: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone. No Yes. Fill in the details.	meone else owns? Incl	ude any proper	ty you borrov	wed from, are storing	for, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe th	e property	Value	

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 46 of 61 Case number (if known) 6/15/18 12:50PM

Debtor 1 Stacy V. Mathews

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	25. Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any enviro	onmental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing ex	ecutive of a corporation					
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation					
	■ No. None of the above applies. Go to F	Part 12.					
	_	in the details below for each business.					
	Business Name	Describe the nature of the business	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security in Dates business existed	number or ITIN.			
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to	anyone about your business? Inclu	de all financial			
	■ No □ Yes. Fill in the details below.						
	Name Address (Number Street City State and 7/10 Code)	Date Issued					

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main

Page 47 of 61
Case number (if known) Document Debtor 1 Stacy V. Mathews

Part 12	2: Sign Below		
are true with a b	and correct. I under	this Statement of Financial Affairs and any attachments, and I declar restand that making a false statement, concealing property, or obtaini result in fines up to \$250,000, or imprisonment for up to 20 years, or 0, and 3571.	ng money or property by fraud in connection
/s/ Sta	acy V. Mathews		
Stacy	V. Mathews	Signature of Debtor 2	
Signat	ure of Debtor 1		
Date	June 15, 2018	Date	
Did you	ı attach additional pa	ages to Your Statement of Financial Affairs for Individuals Filing for I	Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you	ı pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy form	s?
■ No			
☐ Yes.	Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signal	gnature (Official Form 119).

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 48 of 61 $^{6/15/18}$ Entered 06/15/18 12:52:51

Fill in this inforr	mation to identify your	case:		
Debtor 1	Stacy V. Mathews	3		
D 14 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo				
Statemer	nt of Intentio	n for Indiv	∕iduals Filing Under Chap	ter 7 12/15
		_		
	ividual filing under cha e claims secured by yo		Il out this form if:	
_	sed personal property a		not expired	
You must file this	s form with the court wever is earlier, unless th	ithin 30 days after	you file your bankruptcy petition or by the date time for cause. You must also send copies to	
	eople are filing togethened the community of the community of the form.	in a joint case, bo	oth are equally responsible for supplying correc	t information. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this form. (On the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
1. For any credite		art 1 of Schedule D	D: Creditors Who Have Claims Secured by Propo	erty (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the property t secures a debt?	
			secures a dept?	as exempt on Schedule C?
			<u>_</u>	_
Creditor's L name:	oandepot.com, Llc		☐ Surrender the property.	□ No
	3602 Deerpath Lar	e South	☐ Retain the property and redeem it.☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	Chicago Heights, I		Retain the property and [explain]:	
securing debt:	Cook County		Debtor will retain collateral and contin to make regular payments.	ue
Part 2: List Yo	our Unexpired Persona	I Property I eases		
For any unexpire in the informatio	ed personal property le on below. Do not list rea	ase that you listed Il estate leases. Ur	in Schedule G: Executory Contracts and Unexp nexpired leases are leases that are still in effect the trustee does not assume it. 11 U.S.C. § 365	the lease period has not yet ended.
Describe your u	nexpired personal pro	perty leases		Will the lease be assumed?
I	•			-
Lessor's name: Description of lea	ased			□ No
Property:	-			☐ Yes
Lessor's name:				□ No
Description of les	acad			i INO

Official Form 108

Property:

Statement of Intention for Individuals Filing Under Chapter 7

☐ Yes

Desc Main Entered 06/15/18 12:52:51 Case 18-17143 Doc 1 Filed 06/15/18 Page 49 of 61 Document Debtor 1 Stacy V. Mathews Case number (if known) □ No

Lessor's name: Description of leased Property: ☐ Yes Lessor's name: ☐ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. X /s/ Stacy V. Mathews Signature of Debtor 2 Stacy V. Mathews Signature of Debtor 1 Date

June 15, 2018

Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 54 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

	Northern District of Illinois		
In		Case No.	
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTORNE	EY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for compensation paid to me within one year before the filing of the petition in bankruptcy, or ag be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankrupt	greed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	1,450.00
	Prior to the filing of this statement I have received	\$	570.00
	Balance Due	\$	880.00
2.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other person unles	s they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who a copy of the agreement, together with a list of the names of the people sharing in the comp		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the	he bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determing the behalf of the debtor of the debtor and plan which may confirmation of the debtor at the meeting of creditors and confirmation hearing, and any double of the debtor at the meeting of creditors and confirmation hearing, and any double of the debtor at the meeting of creditors and confirmation hearing, and any double of the debtor at the meeting of creditors and confirmation hearing, and any double of the debtor in determine the provision of the debtor at the meeting of creditors and confirmation hearing, and any double of the debtor in determine the provision of the debtor at the meeting of creditors and confirmation hearing. b. Representation of the debtor at the meeting of creditors and confirmation hearing, and any double of the debtor at the meeting of creditors and confirmation hearing. c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any double of the debtor at the meeting of creditors and confirmation hearing. d. Representation of the debtor at the meeting of creditors and confirmation hearing. d. Representation of the debtor at the meeting of creditors and confirmation hearing. d. Representation of the debtor at the meeting of creditors and confirmation hearing. d. Representation of the debtor at the meeting of creditors. d. Representation of the debtor at the meeting of creditors. d. Representation of the debtor at the meeting of creditors. d. Representation of the debtor at the meeting of creditors. d. Representation of the debtor at the meeting of creditors. d. Representation of the debtor at the meeting of creditors. d. Representation of the debtor at the meeting of creditors. d. Representation of the debtor at the meeting of creditors. d. Representation of the debtor at the meeting of creditors. d. Representation of the	be required; y adjourned hear	rings thereof;
	agreements and applications as needed; preparation and filing of motion avoidance of liens on household goods.		
6	Dry agreement with the debter(s) the shows disclosed fee does not include the following same	i	

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances (except in Chapter 13 cases), or any other adversary proceeding.

cases), or any other adversary proceeding.				
	CERTIFICATION			
I certify that the foregoing is a complete stater this bankruptcy proceeding.	ment of any agreement or arrangement for payment to me for representation of the debtor(s) in			
June 15, 2018	/s/ David M. Siegel			
Date	David M. Siegel			
	Signature of Attorney			
	David M. Siegel & Associates			
	790 Chaddick Drive			
	Wheeling, IL 60090			
	(847) 520-8100			
	Name of law firm			

Chapter 7 Bankruptcy Retainer Agreement

This Agreement acknowledges that the undersigned individuals(s)[Client(s)] hereby retains and employs the Law Firm of David M. Siegel & Associates, LLC [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney Fees, which may be divided into two portions, as follows:

- a) A FLAT FEE as specified in paragraph (i) will be required to complete both portions of bankruptcy representation. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation pursuant to Portion One shall begin upon execution of this Agreement. Once Client has paid at least \$400.00, has authorized an automatic payment plan arrangement and has completed all pre-bankruptcy filing requirements, the case is eligible for filing. Portion One fees include preparation, review, revision if necessary, communication with Client and all other work done prior to case filing. Portion One representation shall conclude immediately once the case is filed.
- c) Representation pursuant to Portion Two shall begin immediately after the case is filed. A separate Post-Petition Retainer Agreement shall be prepared and executed as soon as practicable after the case is filed. Portion Two fees include representation and appearance at the meeting of creditors, 2004 examination, if necessary, communication with the bankruptcy and United States' trustees, communication with creditors, review and completion of reaffirmation agreement(s) and court appearances. Portion Two representation shall conclude upon discharge or case closing. If the Client pays the entire fee before the case is filed, the attorney's representation will continue as stated above with no need for a Post-Petition Retainer Agreement.
- d) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter into an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- e) Additional Fees in Portion Two of the representation may include: \$250.00 for missed 341 meeting; \$100.00 to amend Schedules D, E and F to include creditors who were not originally provided by Client; \$25.00 for any non-sufficient /returned checks; and \$820.00 to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- f) In the event that a Client pays the flat fee in full and later elects to not proceed, the Client is entitled to a refund of the court costs and filing fees only.
- g) **Debts that are discharged**. The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different

Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debt owed when the bankruptcy case was converted.)

h) Debts that are not discharged. Some of the common types of debts which are not discharged in a Chapter 7 case are: debts for most taxes; debts that are in the nature of alimony, maintenance or support; debts for student loans, debts for fines, penalties, forfeitures or criminal restitution obligations; debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated; some debts that are not properly listed by the Client; debts that the bankruptcy court specifically determines to be non-dischargeable; and debts for which the Client has given up the discharge protection; y signing a reaffirmation agreement.

i)	The FLAT FEE	for representat	tion will be \$	1450	<u>00</u>

Client acknowledges that he or she has read this Agreement in its entirety, understands it fully, had had an opportunity to ask questions regarding this Agreement, is satisfied with it, and accepts it in its entirety.

Date: * Sune 11, 2018	Signed Auch V Malley
	Print:
Date:	Signed:
	Print:
Date: 6/////	Signed
<i>.</i>	Attorney for David M. Siegel & Associates II C

Case 18-17143 Doc 1 Filed 06/15/18 Entered 06/15/18 12:52:51 Desc Main Document Page 57 of 61 $^{6/15/18}$ 12:50PM

United States Bankruptcy Court Northern District of Illinois

In re	Stacy V. Mathews		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	40
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	tors is true and correct to	the best of my
Date:	June 15, 2018	/s/ Stacy V. Mathews Stacy V. Mathews Signature of Debtor		

Aargon Collection Agency 3025 W Sahara Las Vegas, NV 89102

Acme Contl Credit Unio 13601 S Perry Ave Riverdale, IL 60827

Aspen Dental 15894 S LaGrange Road Orland Park, IL 60462

Capital One 15000 Capital One Dr Richmond, VA 23238

CBNA (Home Depot)
Attn: Banrkuptcy Dept.
PO Box 769006
San Antonio, TX 78245-9006

Chase Card Po Box 15298 Wilmington, DE 19850

Comenity Bank/carsons Po Box 182789 Columbus, OH 43218

Comenity Bank/pier 1 Po Box 182789 Columbus, OH 43218

Creditors Collection Bureau Inc. PO Box 63 Kankakee, IL 60901

DJO Global 599 Cardigan Road Saint Paul, MN 55126

Donna Sharp Collection Dept. 9650 Gordon Drive Highland, IN 46322

Franciscan Alliance 28044 Network Place Chicago, IL 60673-1280

Franciscan Hammond Clinic, LLC 7905 Calumet Ave Munster, IN 46321-1298

Franciscan Physican 701 Superior Drive Munster, IN 46321

Franciscan St. Margaret 701 Superior Drive Munster, IN 46321

Komyatte & Casbon Attn: Collections Department 9650 Gordon Drive Highland, IN 46322

Komyattecasb 9650 Gordon Drive Highland, IN 46322

Loandepot.com, Llc 26642 Towne Centre Dr Foothill Ranch, CA 92610

M & M Asset Locators Attn:Bankruptcy 213 Rainbow Drive #11343 Livingston, TX 77399

Macy's Bankruptcy Processing PO Box 8053 Mason, OH 45040

MACYSDSNB 911 Duke Blvd. Mason, OH 45040 Miramed Revenue Group Dept. 77304 PO Box 77000 Detroit, MI 48277-0304

Nationwide Credit & Collections, In 815 Commerce Drive Suite 100 Oak Brook, IL 60523

Pathology Consultants, Inc. PO Box 30309 Charleston, SC 29417-0309

PCL Alverno 7905 Calumet Ave Munster, IN 46321

Professional Clinical Laboratories, 555 W Court Street Suite 300 Kankakee, IL 60901-3600

Prosper Marketplace In 101 2nd St Fl 15 San Francisco, CA 94105

SBA Disaster Recovery-Collection PO Box 740192 Atlanta, GA 30374-0192

Scheck & Siress Prosthetics Inc. 1S376 Summit Ave., Ct. E Oak Brook Terrace, IL 60181

Sears/cbna Po Box 6189 Sioux Falls, SD 57117

Syncb/care Credit 950 Forrer Blvd Kettering, OH 45420 Syncb/value City Furni 950 Forrer Blvd Kettering, OH 45420

Syncb/walmart Po Box 965024 Orlando, FL 32896

Thd/cbna Po Box 6497 Sioux Falls, SD 57117

The University of Illinois at Chic Physician Group 3293 Payshere Circle Chicago, IL 60674

The University of Illinois Chicago Surgery Clinic 1801 West Taylor St., 1st Floor Chicago, IL 60612

U Of I Department Of Pathology 5841 S. Maryland Avenue Chicago, IL 60637

UIC Physician Group 7720 Solution Center Chicago, IL 60677-7007

Univ of Illinois Phys PO Box 140250 Toledo, OH 43614

University of Illinois College of M 7720 Solution Center Chicago, IL 60677-7007